United States Bankruptcy Court Eastern District of New York

In re	Sonia F		Case No.	8-18-76792			
		Debtor(s)	Chapter	7			
		AFFIDAVIT PURSUANT TO LOCAL RULE 1007-1(I	<u>B)</u>				
	Sonia	Rosales, undersigned debtor herein, swears as follows:					
1.	Debtor	filed a petition under chapter of the Bankruptcy Code on oc	tober 9, 20	18			
2.	Schedule(s) _Summary of schedules, Schedules A, B, C, D, E, F, G, H, I, J, Declaration Concerning Debtor(s) schedules, Statement of Financial Affairs, Statement of Intention, Disclosure of Compensation Pursuant to FBR 2016(b), Pre-Petition Statement Pursuant to Local Bankruptcy Rule 2017-1, Verification of Matrix, Statement of Local Rule 1073-2(b) were not filed at the time of filing of the said petition, and is/are being filed herewith.						
3.	[Check	applicable box]:					
	V	The schedules filed herewith reflect no additions or corrections to, o which accompanied the petition.	r deletions	from, the list of creditors			
		Annexed hereto is a listing of names and addresses of scheduled cre of creditors which accompanied the petition. Also listed, as applicable previously listed names and/or addresses have been corrected. The number of correction is indicated for each creditor listed.	le, are any	scheduled creditors whose			
4.		litors have been added] An amended mailing matrix is annexed hereto nat prescribed by Local Rule 1007-3.	o, listing ac	Ided creditors ONLY, in			
		amendment of schedules is effective until proof of service in accord the Court.	ance with	EDNY LBR 1009-1(b) has			
amendr deemed object t hearing	nent is f I to cons to the dis ; if no ob	to the list of creditors which accompanied the petition will be deemed filed prior to the expiration of the time period set forth in Fed. R. Bank titute a motion for a 30-day extension of the time within which any accharge of the debtor and/or to determine dischargeability. This motion becomes filed with the Court and served on debtor within 10 days for all attachments and the amended schedules in accordance with EDN	kr. P. 4004 dded credit on will be d bllowing fil	and 4007, it will be fors may file a complaint to eemed granted without a ing of proof of service of			
Dated:	Nov	rember 12, 2018					
		Isl Sonia Rosales Sonia Rosales Debtor (signature)					
Sworn day of		re me this					
Notary	Public,	State of New York					

Aff1007-1b_64

4419

Fill	in this informat	tion to identify your	case:		20.00		4419
Del	otor 1	Sonia Rosales					
Del	otor 2	First Name	Middle Name	Last Name			
1	ouse if, filing)	First Name	Middle Name	Last Name			
Uni	ted States Bankr	ruptcy Court for the	EASTERN DISTRICT	OF NEW YORK			
	se number lown)					Land .	c if this is an ded filing
Of	ficial Forn	n 106Sum					
_			and Liabilities a	ınd Certain Statistic	cal Information		12/15
info you	rmation. Fill out r original forms,	all of your schedul you must fill out a	es first; then complete	le are filing together, both ar the information on this form ck the box at the top of this	. If you are filing amende		
Par	Summari	ze Your Assets					
						Your a	ssets of what you own
1.		: Property (Official F				¢	249,524.00
						\$	·
	1b. Copy line 6	2, Total personal pro	perty, from Schedule A/E	3		\$	12,918.00
	1c. Copy line 6	3, Total of all propert	y on Schedule A/B			\$	262,442.00
Par	t 2: Summari	ze Your Liabilities					
							abilities t you owe
2.	Schedule D: Ci	reditors Who Have C	laims Secured by Propei	tv (Official Form 106D)		, 11,10-01,	
				at the bottom of the last page o	f Part 1 of Schedule D	\$	363,967.00
3.			Unsecured Claims (Office 1 (priority unsecured cla	ial Form 106E/F) ims) from line 6e of <i>Schedule E</i>	€/F,	\$	0.00
	3b, Copy the to	otal claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedu.	le E/F	\$	434.00
					Your total liabilities	\$	364,401.00
Par	t 3: Summari:	ze Your Income and	I Expenses				
4.		ur Income (Official Fo	,	ile I		\$	7,327.36
5.		our Expenses (Officia hthly expenses from li				\$	7,847.00
Par	t 4: Answer T	hese Questions for	Administrative and Sta	atistical Records			
6.			er Chapters 7, 11, or 13 on this part of the form.	? Check this box and submit this	form to the court with you	ır other sch	nedules.
7.	Yes What kind of c	debt do you have?					
				r debts are those "incurred by a -9g for statistical purposes. 28		a personal,	family, or
		ts are not primarily with your other sched		ave nothing to report on this pa	art of the form. Check this	box and su	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1	Sonia Rosales	ase number (if known)	
	om the Statement of Your Current Monthly Income: Copy your total current in 2A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.		\$ 0.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	V T T T
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
sa. Domestic support obligations (Copy line oa.)	Ψ	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Sonia Rosale First Name		e Name	Last Name				
Debtor 2								
	First Name		e Name	Last Name				
Jnited States Bankru	iptcy Court for i	ine: EASTERN	DISTRIC	CT OF NEW YORK				
Case number								eck if this is a ended filing
Official Form	106A/B							
Schedule		operty					12/	15
	any legal or equ			Estate You Own or Have an Interest In ence, building, land, or similar property?				
.1 5 Leyden St			What	is the property? Check all that apply Single-family home	Do not dedu	ct secured cla	ims or exc	emptions. Put
Street address, if available, or other description		Duplex or multi-unit building the			amount of any secured claims on Schedu ditors Who Have Claims Secured by Prop			
	llable, or other desc	TIPRIOTI	_	Condominium or cooperative	Creditors vvi			
Street address, if ava Huntington Station	NY	11746-0000		Manufactured or mobile home	Current valuentire prope	rty?	Current portion	value of the you own? \$249 524 0
Street address, if ava				Manufactured or mobile home Land Investment property Timeshare Other	Current valuentire prope \$24\$ Describe the (such as fee	nty? 0,524.00 e nature of yo simple, tena	Current portion	
Street address, if ava Huntington Station	NY	11746-0000		Manufactured or mobile home Land Investment property Timeshare	Current valuentire prope	nty? 0,524.00 e nature of yo simple, tena , if known.	Current portion	you own? \$249,524.0 rship interest
Huntington Station City Suffolk	NY	11746-0000	Who	Manufactured or mobile home Land Investment property Timeshare Other nas an interest in the property? Check one Debtor 1 only Debtor 2 only	Current valuentire prope \$24\$ Describe the (such as fee a life estate)	nty? 0,524.00 e nature of yo simple, tena , if known.	Current portion	you own? \$249,524.0 rship interest
Street address, if ava Huntington Station City	NY	11746-0000	Who h	Manufactured or mobile home Land Investment property Timeshare Other has an Interest in the property? Check one Debtor 1 only	Current valuentire proper \$24\$ Describe the (such as fee a life estate) Sole Owr	rty? 9,524.00 e nature of your simple, tena e, if known. Her f this is communities.	Current portion our owne incy by th	you own? \$249,524.0 rship interest le entireties, (

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B

Debt	or 1 S	onia Rosales		C	Case number (if known)	
3. Ca	ırs, vans,	trucks, tractors	s, sport utility ve	hicles, motorcycles		
	No					
	Yes					
		_			Do not doduct convent	alaissa ar arramationa. But
3_1				Who has an interest in the property? Check one	the amount of any secu	claims or exemptions, Put red claims on Schedule D:
	Model: Year:	Sienna 2010		Debtor 1 only	Creditors Who Have Ci	aims Secured by Property.
		nate mileage:	80,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		ormation:	00,000	☐ At least one of the debtors and another		F,
				☐ Check if this is community property (see instructions)	\$8,068.00	\$8,068.00
Exa	amples: B			d other recreational vehicles, other vehicles, and tercraft, fishing vessels, snowmobiles, motorcycle		
				n for all of your entries from Part 2, including a hat number here		\$8,068.00
Part :	SAUL.		and Household Ite			
Do y	ou own o	or have any lega	al or equitable inf	erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E:	kamples: No			china, kitchenware		siame of examplions.
	Yes De	scribe				
		Н	lousehold goo	ds and furnishings		\$2,000.00
E:		Televisions and including cell ph		eo, stereo, and digital equipment; computers, printe edia players, games	ers, scanners; music collec	tions; electronic devices
		Т	v, Cell			\$500.00
E:	kamples:	other collections	urines; paintings, _l , memorabilia, col	orints, or other artwork; books, pictures, or other ar lectibles	rt objects; stamp, coin, or b	aseball card collections;
E:	kamples:	musical instrume	phic, exercise, an	d other hobby equipment; bicycles, pool tables, go	olf clubs, skis; canoes and k	ayaks; carpentry tools;
10. F	irearms		hotguns, ammunit	ion, and related equipment		

Official Form 106A/B

Schedule A/B: Property

Debtor	1 Sonia Rosales	S		Case number (if known)
ΠY	es. Describe				
11. Clo	amples: Everyday clot	hes, fur	s, leather coats, desig	ner wear, shoes, accessories	
II Y	es. Describe				
		Weari	ng apparel		\$800.00
12. Jew <i>Ex</i> : □ N	amples: Everyday jew	eiry, co	stume jewelry, engage	ment rings, wedding rings, heirloom jewelry, watches,	gems, gold, silver
	es. Describe				
		Wedd	ing rings, costume	jewelry	\$1,000.00
	n-farm animals	ما اسا			
Ex. ■ N	<i>amples:</i> Dogs, cats, bi	ras, no	ses		
1-1 -11 -	es. Describe				
		_			
		house	hold items you did n	ot already list, including any health aids you did no	ot list
■ N		matica			
ШY	es. Give specific info	mation	···•		
45.				4 0 to the discount of the control o	
			/our entries from Pai here	t 3, including any entries for pages you have attac	\$4,300.00
Part 4:	Describe Your Financi	al Asset	•		
			quitable interest in a	ny of the following?	Current value of the
,					portion you own? Do not deduct secured claims or exemptions.
16. Cas	sh				
		ave in y	our wallet, in your hom	e, in a safe deposit box, and on hand when you file yo	our petition
<u> </u>	lo				
□ Y	es			***************************************	
17. De j <i>E</i> x	posits of money amples: Checking, say institutions. If	vings, o you ha	r other financial accou ve multiple accounts v	nts; certificates of deposit; shares in credit unions, bro vith the same institution, list each.	okerage houses, and other similar
	lo				
■ Y	es			Institution name:	
			E. E.		#0.00
		17.1.	Checking	Bank of America; acct #3607	\$0.00
			Checking; Joint		
		17.2.	with Spouse	NY Community Bank; acct #9138	\$550.00
Ex		r public nvestm	cly traded stocks ent accounts with brok	erage firms, money market accounts	
	lo 'es		Institution or issuer na	ame:	
		ck and	interests in incorpor	ated and unincorporated businesses, including ar	n interest in an LLC, partnership, and
_joi	nt venture			,	., .,
			- L 4 4b		
	·	rmation	about them	 Schedule A/B: Property	page 3
	Form 106A/B Copyright (c) 1996-2018 Best	Case III	C - www heelcase com	Schedule AVD. Floperty	Best Case Bankruptcy
JOHWAIT (20pmgnt (0) 1330-2010 DESC	JUSE, LL			

Debtor 1	Sonia Rosales			Case number (if known)	
		Name of entity:		% of ownership:	
		Self employed clea and/or accounts re	nning business; no assets ceivables	%	\$0.00
Negot Non-n ■ No	iable instruments inc	clude personal checks, ca ts are those you cannot tr	otiable and non-negotiable inst ishiers' checks, promissory notes, ansfer to someone by signing or o	, and money orders,	
□ res.	Give specific informa	Issuer name:			
21. Retire i <i>Exam</i> i □ No	ment or pension acodes: Interests in IRA	counts , ERISA, Keogh, 401(k),	403(b), thrift savings accounts, or	other pension or profit-sharing pla	ns
Yes.	List each account se	eparately. Type of account:	Institution name:		
			Retirement account t	hrough employer	Unknown
Your s Exam	ty deposits and pre share of all unused do loles: Agreements wit	eposits you have made s	o that you may continue service o , public utilities (electric, gas, wate	or use from a company er), telecommunications companies	, or others
■ No □ Yes.			Institution name or individ	dual:	
23. Annui t	ti es (A contract for a	periodic payment of mon	ney to you, either for life or for a ni	umber of years)	
☐ Yes.	lssue	r name and description.			
	ts in an education I C. §§ 530(b)(1), 529		qualified ABLE program, or und	der a qualified state tuition progra	am.
☐ Yes.	Institu	ution name and description	on. Separately file the records of a	any interests.11 U.S.C. § 521(c):	
25. Trusts No	, equitable or future	e interests in property (other than anything listed in lin	e 1), and rights or powers exerci	sable for your benefit
☐ Yes.	Give specific inform	nation about them			
			and other intellectual property eds from royalties and licensing a	greements	
	Give specific inform	nation about them			
27 Licens Exam	es, franchises, and oles: Building permits	d other general intangibles, exclusive licenses, coo	les perative association holdings, liqu	uor licenses, professional licenses	
☐ Yes.	Give specific inform	nation about them			
Money or	property owed to y	ou?		*	Current value of the portion you own? Do not deduct secured claims or exemptions.
_	funds owed to you				
■ No □ Yes	Give specific inform	ation about them, includir	ng whether you already filed the re	eturns and the tax years	
29. Family	r sunnort				
Exam	ples: Past due or lum	np sum alimony, spousal	support, child support, maintenan	ce, divorce settlement, property set	ttlement
☐ Yes Official For	Give specific inform m 106A/B	ation	Schedule A/B: Property		page -

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De	btor 1	Sonia Rosales	Case number (if known)	
		mounts someone owes you les: Unpaid wages, disability insurance paymen benefits; unpaid loans you made to someor	nts, disability benefits, sick pay, vacation pay, workers' comper ne else	sation, Social Security
	☐ Yes.	Give specific information		
0.4	l., t.,	to to to occur a malfata		
		ts in insurance policies les: Health, disability, or life insurance; health sa	avings account (HSA); credit, homeowner's, or renter's insuran	се
		Name the insurance company of each policy and	d list its value.	
		Company name:	Beneficiary:	Surrender or refund value:
	If you a someo ■ No	erest in property that is due you from some or the beneficiary of a living trust, expect procedule has died. Give specific information	one who has died eds from a life insurance policy, or are currently entitled to rece	ive property because
	Ехатр	against third parties, whether or not you have les: Accidents, employment disputes, insurance	ve filed a lawsuit or made a demand for payment e claims, or rights to sue	
	■ No	D. The state of th		
		Describe each claim		=
	Other c	ontingent and unliquidated claims of every r	nature, including counterclaims of the debtor and rights to	set off claims
		Describe each claim		
35.	Any fin	ancial assets you did not already list		
	■ No			
	☐ Yes.	Give specific information		
36			t 4, including any entries for pages you have attached	\$550.00
Pai	t 5: Des	scribe Any Business-Related Property You Own or	Have an Interest In. List any real estate in Part 1.	
- North-Care	Section 1	wn or have any legal or equitable interest in any b	•	
37		to Part 6.	usiness-related property:	
	_	o to line 38.		
	172			
Pai		cribe Any Farm- and Commercial Fishing-Related ou own or have an interest in farmland, list it in Part 1.	Property You Own or Have an Interest In.	
46	Link	own or have any legal or equitable interest i	in any farm- or commercial fishing-related property?	
	☐ Yes	Go to line 47		
N-	11.72			
Pai	rt 7:	Describe All Property You Own or Have an Intere	st in That You Did Not List Above	
	Examp	have other property of any kind you did not les: Season tickets, country club membership	already list?	
	■ No □ Yes	Give specific information		
	cə⁻,	ONE Specific information		
54	. Add t	ne dollar value of all of your entries from Par	t 7. Write that number here	\$0.00

Official Form 106A/B

Schedule A/B: Property

page 5

Debtor 1 Sonia Rosales		Case number (if known)	
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			\$249,524.00
56, Part 2: Total vehicles, line 5	\$8,068.00		
57, Part 3: Total personal and household items, line 15	\$4,300.00		
58 Part 4: Total financial assets, line 36	\$550.00		
59, Part 5: Total business-related property, line 45	\$0.00		
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7: Total other property not listed, line 54	+ \$0.00		
62. Total personal property. Add lines 56 through 61	\$12,918.00	Copy personal property total	\$12,918.00
63. Total of all property on Schedule A/B. Add line 55 + line 65	2		\$262,442.00

Debtor 1	Sonia Rosales First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F NEW YORK	
Case number (if known)				☐ Check if this is an amended filing

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt, If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.									
	☐ You are claiming state and federal nonbar	nkruptcy exemptions. 1	I1 U.S	S.C. § 522(b)(3)						
	You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	eck only one box for each exemption						
	5 Leyden St Huntington Station, NY 11746 Suffolk County	\$249,524.00		\$11,825.00	11 U.S.C. § 522(d)(1)					
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit						
	2010 Toyota Sienna 80,000 miles	\$8,068.00		\$3,775.00	11 U.S.C. § 522(d)(2)					
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit						
	2010 Toyota Sienna 80,000 miles	\$8,068.00		\$4,293.00	11 U.S.C. § 522(d)(5)					
	Line from Scriedule Arb. 3.1			100% of fair market value, up to any applicable statutory limit						
	Household goods and furnishings Line from Schedule A/B: 6.1	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)					
	Line Ironi Schedule Arb. 6.1			100% of fair market value, up to any applicable statutory limit						
	Tv, Cell Line from Schedule A/B; 7.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)					
	Line from Scriedule A/b. 1.1			100% of fair market value, up to any applicable statutory limit						

ebtor 1	Sonia Rosales			Case number (if known)		
	f description of the property and line on edule A/B that lists this property	Current value of the portion you own	Am	Specific laws that allow exemption		
		Copy the value from Schedule A/B				
	aring apparel e from <i>Schedule A/B</i> : 11.1	\$800.00		\$800.00	11 U.S.C. § 522(d)(3)	
Line	TION Suredule AVE. TTT			100% of fair market value, up to any applicable statutory limit		
	dding rings, costume jewelry	\$1,000.00	-	\$1,000.00	11 U.S.C. § 522(d)(4)	
Lille	TIOTI Scriedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit		
	ecking; Joint with Spouse: NY mmunity Bank; acct #9138	\$550.00		\$550.00	11 U.S.C. § 522(d)(5)	
	e from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit		
	irement account through	Unknown		Unknown	11 U.S.C. § 522(d)(12)	
	e from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
	you claiming a homestead exemptior oject to adjustment on 4/01/19 and every No				nt.)	
	Yes. Did you acquire the property cove	red by the exemption w	ithin 1	,215 days before you filed this case	?	
	□ No □ Yes					
	00					

Filli	in this inform	ation to identify you	ır case:			OV.	4419
Deb	tor 1	Sonia Rosales					
		First Name	Middle Name Last	Name			
	tor 2 use if, filing)	First Name	Middle Name Last	Name			
, ,			EASTERN DISTRICT OF NEW YOR	o k			
Unit	ed States Ban	kruptcy Court for the	EASTERN DISTRICT OF NEW YOR	N.			
	e number						
(if kno	own)						k if this is an ded filing
						arrich	aca ming
Offi	icial Form	106D					
Sc	hedule l	D: Creditors	Who Have Claims Sec	cured	by Propert	У	12/15
ls nee	complete and eded, copy the per (if known).	accurate as possible. Additional Page, fill it	If two married people are filing together, bo out, number the entries, and attach it to this	th are equa	ally responsible for su the top of any additio	upplying correct inform nal pages, write your n	ation. If more space ame and case
	, ,	nave claims secured by	y your property?				
	□ No. Check	this box and submit t	his form to the court with your other sche	dules. You	u have nothing else t	o report on this form.	
Ĭ	Yes Fill in	all of the information	below.		_		
		Secured Claims					
			more than one secured claim, list the creditor s	enarately	Column A	Column B	Column C
for e	ach claim. If mo h as possible, lis	ore than one creditor has tt the claims in alphabeti	s a particular claim, list the other creditors in Pa ical order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Mr. Coope Nationstar		Describe the property that secures the cla	aim:	\$363,967.00	\$249,524.00	\$114,443.00
	Creditor's Name		5 Leyden St Huntington Station,		-		
		l, Lambert,	11746 Suffolk County				
	Weiss, We & Gordon	isman	As of the date you file, the claim is: Check	all that			
	53 Gibson	St	apply				
	Bay Shore		☐ Contingent				
	Number, Street,	City, State & Zip Code	Unliquidated				
Mhe	owes the deb	2 Chark and	☐ Disputed Nature of lien. Check all that apply.				
-		ot r check one.	An agreement you made (such as mortga		rad		
	Debtor 1 only Debtor 2 only		car loan)	age or secu	rea		
_	Debtor 2 only Debtor 1 and Det	otor 2 only	Statutory lien (such as tax lien, mechanic	's lien)			
		e debtors and another	☐ Judgment lien from a lawsuit	3 11011)			
	Check if this cla		Other (including a right to offset)				
	community deb		- Other (including a right to onset)				
Date	debt was incu	rred 10/05	Last 4 digits of account number	3894		p.	
		•	Column A on this page. Write that number he	ere:	\$363,96	-	
	rite that numbe		the dollar value totals from all pages.		\$363,96	67.00	
Dar	1 ist Oth	ore to Be Notified fo	or a Debt That You Already Listed				
			ne notified about your bankruptcy for a debt	that you a	leady listed in Dort 4	For example, if a pallo	otion agoney is
tryin than	g to collect fro one creditor fo	m you for a debt you o	owe to someone else, list the creditor in Part t you listed in Part 1, list the additional cred	t 1, and the	en list the collection a	gency here. Similarly, if	you have more
	Nome Nuc-	or Stroot City State P	Zin Codo				
		er, Street, City, State & er fka Nationstar	Zip Code	On which	line in Part 1 did you e	nter the creditor? 2.1	
	PO Box 6			Last 4 dig	gits of account number	_	
	Dallas, TX	75261					

Official Form 106D

Debtor 1	r 1 Sonia Rosales			Case number (if knöwn)	4419
	First Name	Middle Name	Last Name		
M 89	ame, Number, Street, City Ir. Cooper fka Natio 950 Cypress Water: oppell, TX 75019	nstar		On which line in Part 1 did you enter the creditor? Last 4 digits of account number	

Fill in t	this inforn	nation to identify your	case:			15.			4419
Debtor	1	Sonia Rosales							
Dalatan	0	First Name	Middle Na	me	Last Name				
Debtor (Spouse i		First Name	Middle Na	me	Lasi Name				
United	States Ba	nkruptcy Court for the:	EASTERN D	ISTRICT OF NE	WYORK			_	
Case n (if known)								_	Check if this is an amended filing
		n 106E/F							
		/F: Creditors W							12/15
Schedule left. Attaname an Part 1:	e D: Credito ch the Con id case nun List Al any credito	tory Contracts and Unexpors Who Have Claims Sectinuation Page to this pagnber (if known). If of Your PRIORITY Unors have priority unsecure	ured by Propert e. If you have n secured Clain	y. If more space i o information to r ns	s needed, copy	the Part ye	ou need, fill	l it out, number the er	tries in the boxes on the
	No. Go to P Yes.	art 2.							
		II of Your NONPRIORIT	Y Unsecured	Claims					
	-	ors have nonpriority unsec							
	No. You hav	ve nothing to report in this p	art. Submit this fo	orm to the court wit	th vour other sch	edules.			
	Yes.				_				
uns	ecured clair n one credit t 2.	nonpriority unsecured cl n, list the creditor separately or holds a particular claim, li vide Insurance	y for each claim. st the other cred	For each claim list	ed, identify what u have more that	type of clai	m it is. Do n	ot list claims already in	cluded in Part 1. If more
	Nonpriority	Creditor's Name							
	c/o Cred	dit Collection Servic	es	When was the de	bt incurred?	1/16-9	/18		-
		Center. MA 02459							
		treet City State ZIp Code		As of the date yo	u file, the claim	is: Check a	all that apply	1	
	Who incu	rred the debt? Check one,							
	Debtor	1 only		☐ Contingent					
	☐ Debtor	2 only		☐ Unliquidated					
	☐ Debtor	1 and Debtor 2 only		☐ Disputed					
	☐ At leas	t one of the debtors and and	Juliei	Type of NONPRIC	ORITY unsecure	d claim:			
		if this claim is for a com	nunity	☐ Student loans					
	debt Is the clai	m subject to offset?		□ Obligations arise report as priority cl □		aration agre	eement or di	vorce that you did not	
	■ No	,,		☐ Debts to pension		ng plans, ar	nd other sim	ilar debts	
	☐ Yes			Other Specify	Insurance	bill			
				— Other Specify					
Part 3:	List O	thers to Be Notified Ab	out a Debt Th	at You Already	Listed				
is tryi have i	nis page on ing to colle more than	ally if you have others to be to from you for a debt you one creditor for any of the debts in Parts 1 or 2, do no	notified about owe to someor debts that you	your bankruptcy, le else, list the or listed in Parts 1 c	for a debt that	Parts 1 o	r 2, then lis	t the collection agend	y here. Similarly, if you
Part 4:	Add th	ne Amounts for Each T	ype of Unsecu	red Claim					
	the amoun	ts of certain types of unseed claim.	ecured claims. T	his information is	s for statistical	eporting p	urposes or	nly. 28 U.S.C. §159. Ad	dd the amounts for each
		6a Domostic supra-d	ahligations			6a.	\$	Total Claim	
		6a Domestic support	nnigations			ua.	Φ		
	orm 106 F/I	_		F: Creditors Who	Have Un	- d OI-1			Page 1 of

Debtor 1 Son	ia Ro		Case nu	umber (if known)	
					0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e	Total Priority. Add lines 6a through 6d	6e.	\$	0.00
	6f.	Student loans	6f.	Total C	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. 6h.	\$	0.00
	6h,	Debts to pension or profit-sharing plans, and other similar debts		\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	434.00
	6j.,	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	434.00

ill in thi	is inforn	nation to identify your	case:				
ebtor 1		Sonia Rosales	Middle Nam		Last Name		
ebtor 2		First Name	ivildale Nam	le	Last Name		
oouse if, f	filing)	First Name	Middle Nam	e	Last Name		
nited St	tates Ba	nkruptcy Court for the:	EASTERN DI	STRICT OF NE	W YORK		
ase nur _{known)}	mber						☐ Check if this is an
							amended filing
.cc: _ : _	-1 -	1000					
		rm 106G	. Contro	ata and l	Inavnirad Lago		40/4
					Jnexpired Leas		12/1
List	separat	ely each person or cor	mpany with who	om you have th	e contract or lease. Then	state what each	contract or lease is for (for
exan and t Per	unexpire	nt, vehicle lease, cell ped leases. company with whom you hame, Number, Street, City	ou have the cor		this form in the instruction be State what the cont	ooklet for more e	xamples of executory contrac
Per	unexpire	ed leases.	ou have the cor		this form in the instruction b	ooklet for more e	xamples of executory contrac
exan and u Per:	son or comme	ed leases. company with whom y. Name, Number, Street, City Street	ou have the cor		this form in the instruction b	ooklet for more e	xamples of executory contrac
Per Nu Cit	son or comme	ed leases. company with whom y. Name, Number, Street, City Street	ou have the cor , State and ZIP Code	ntract or lease	this form in the instruction b	ooklet for more e	xamples of executory contrac
Per Nu Cit	unexpire rson or c ame umber	ed leases. company with whom y. Name, Number, Street, City Street	ou have the cor , State and ZIP Code	ntract or lease	this form in the instruction b	ooklet for more e	xamples of executory contrac
Per:	unexpire son or c ame umber ty umber	ed leases. company with whom you name, Number, Street, City Street	ou have the cor , State and ZIP Code	ntract or lease	this form in the instruction b	ooklet for more e	xamples of executory contrac
Per:	unexpire son or c ame umber ty umber	ed leases. company with whom you name, Number, Street, City Street	ou have the cor , State and ZIP Code State	ntract or lease	this form in the instruction b	ooklet for more e	xamples of executory contrac
Period Number of	unexpire son or c ame umber ty umber ty ame	ed leases. company with whom y Name, Number, Street, City Street	ou have the cor , State and ZIP Code State	ntract or lease	this form in the instruction b	ooklet for more e	xamples of executory contrac
Per:	unexpire son or co ame umber ty umber ty umber	ed leases. company with whom y Name, Number, Street, City Street Street	ou have the cor , State and ZIP Code State	ZIP Code	this form in the instruction b	ooklet for more e	xamples of executory contrac
Per: 2.1 Na Nu Cit 2.2 Na Nu Cit 2.3 Na Nu C	unexpire son or co ame umber ty umber ty umber	ed leases. company with whom y Name, Number, Street, City Street Street	ou have the cor , State and ZIP Code State	ntract or lease	this form in the instruction b	ooklet for more e	xamples of executory contrac
Per 2.1 Na Nu Cit 2.3 Na Nu Cit 2.4	unexpire son or co ame umber ty umber ty umber	ed leases. company with whom y Name, Number, Street, City Street Street	ou have the cor , State and ZIP Code State	ZIP Code	this form in the instruction b	ooklet for more e	xamples of executory contrac
Per: 2.1 Na Nu Cit 2.2 Na Nu Cit 2.3 Na Nu Cit 2.4 Na	unexpire son or c ame umber ty ame ty ame ty ame	ed leases. company with whom y Name, Number, Street, City Street Street	ou have the cor , State and ZIP Code State	ZIP Code	this form in the instruction b	ooklet for more e	xamples of executory contrac

Name

Number

City

Street

ZIP Code

State

Fill in this	information to identify your	case:		11000		119
Debtor 1	Sonia Rosales	Middle Name	Last Name			
Debtor 2	rust wattre	Middle Name	Lastivame			
(Spouse if, filin	ng) First Name	Middle Name	Last Name			
United Stat	tes Bankruptcy Court for the	EASTERN DISTRICT O	F NEW YORK			
Case numb (if known)	oer				☐ Check if this is an amended filing	
Official	Form 106H					
	ule H: Your Cod	ebtors			12/15	5
people are	are people or entities who a filing together, both are equ	ally responsible for supp	lying correct informati	ion. If more space is needed	i, copy the Additional Pag	
	nd number the entries in the and case number (if known		_	o this page. On the top of ar	ny Additional Pages, write	,
1. Do y	you have any codebtors? (If	you are filing a joint case, o	do not list either spouse	as a codebtor.		
■ No						
☐ Yes	F					
	nin the last 8 years, have you a, California, Idaho, Louisiana				s and territories include	
■ No.	Go to line 3.					
☐ Yes	. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?			
in line Form	umn 1, list all of your codeb 2 again as a codebtor only 106D), Schedule E/F (Officia blumn 2.	if that person is a guaran	tor or cosigner. Make s	sure you have listed the cree	ditor on Schedule D (Offic	cial
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor of Check all schedules that	to whom you owe the deb apply:	ot
3.1				☐ Schedule D, line		
1	Name			☐ Schedule E/F, line		
				☐ Schedule G, line		
	Number Street City	State	ZIP Code			
3.2				☐ Schedule D, line		
	Name			☐ Schedule E/F, line		
				☐ Schedule G, line		
	Number Street					

City

State

ZIP Code

Fill	in this information to identify your c	ase:		_	2	Ĺ		44	19
Deb	otor 1 Sonia Rosa	les							
	otor 2 use, if filing)								
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF NEW YORK						
(If kn							d filing ent showing	g postpetition chapter	r
_	fficial Form 106I					MM / DD/ Y	YYY		
	chedule I: Your Inc			an (Dah)	4	and Dahtan OV had		12/	
sup spo atta	is complete and accurate as posiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filir or spouse is not filing wi	ng jointly, and your th you, do not inclu	spouse i	s liv nati	ing with you, inclu on about your spo	ude inform use. If mo	nation about your ore space is needed	,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fil	ing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status*	Employed			■ Emplo	■ Employed		
		Employment status	□ Not employed			☐ Not er			
	employers.	Occupation		Self Employed - Cleaning			Sterile Processing Tech		
	Include part-time, seasonal, or self-employed work.	Employer's name				Hunting	ton Hos	pital	
	Occupation may include student or homemaker, if it applies.	Employer's address				Hunting	ıton Stati	ion, NY 11746	
		How long employed th		achment	for	1 Additional Employ	4 years yment Info	ormation	
Par	t 2: Give Details About Mo	nthly Income							
Esti spou	mate monthly income as of the dise unless you are separated.	ate you file this form. If y	you have nothing to r	eport for	any	line, write \$0 in the	space, Inc	lude your non-filing	
	u or your non-filing spouse have me space, attach a separate sheet to		ombine the informatio	n for all e	mpl	oyers for that perso	n on the lir	nes below. If you nee	d
						For Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2	\$	0.00	\$	5,833.62	
3,	Estimate and list monthly over	ime pay.		3	+\$	0.00	+\$	0.00	

Official Form 1061 Schedule 1: Your Income page 1

0.00

5,833.62

4. Calculate gross Income. Add line 2 + line 3.

Deb	or 1	Sonia Rosales		Cas	se number (if known)			
				F	or Debtor 1	For Debto		
	Сору	y line 4 here	4_	\$	0.00		5,833.62	
_							,	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.		0.00	\$	998.12	
	5b.	Mandatory contributions for retirement plans	5b.		0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.		0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.		0.00	\$	0.00	
	5e.	Insurance	5e.		0.00	\$	86.67	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.		0.00	\$	0.00	
	5h.	Other deductions. Specify: Vision	5h	+ \$	0.00	+ \$	16.99	
		Dental		\$	0.00	\$	47.54	
		Aflac		\$	0.00	\$	33.02	
		403b		\$	0.00	\$	408.66	
		Flex HCA		\$	0.00	\$	220.83	
		Life		\$	0.00	\$	47.28	
		Ltd		\$	0.00	\$	19.33	
		Flex Surch		\$	0.00	\$	86.67	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$ 1	,965.11	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7,	\$	0.00	\$ 3	3,868.51	
8.	8a 8b 8c.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8a. 8b. 8c. 8d.	\$	2,657.50 0.00	\$	0.00	
	8d.	Unemployment compensation			0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	= 8g.	\$		\$	0.00	
	8h.	Other monthly income. Specify: 2nd Job - St. Catherine of Siena	_	+ \$	0.00		0.00 801.35	
	011.	other monthly income. Specify. 2nd 3ob - St. Catherine of Siena	= 011.1	. φ	0.00	3	001.35	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,657.50	\$	801.35	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3	2,657.50 + \$	4,669.86	= \$	7,327.36
11 ₈	Includ	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your rifiends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a cify:	deper			ed in <i>Schedul</i>	'e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines					\$	7,327.36
							Combin	
13.	Do y	ou expect an increase or decrease within the year after you file this form	?				monthly	income
10		No. Yes Explain:						

Official Form 1061 Schedule I: Your Income page 2

Debtor 1	Sonia Rosales	Case number (if known)	

Official Form B 6l Attachment for Additional Employment Information

Spouse		
Occupation	Sterile Processing Tech	
Name of Employer	St. Catherine of Sienna	
How long employed	1 & 1/2 years	
Address of Employer	A Committee of the Comm	
	Smithtown, NY 11787	

Official Form 1061 Schedule I: Your Income page 3

Fill	in this information to identify your case:				441
Deb	otor 1 Sonia Rosales		Ch	eck if this is:	
	otor 2 ouse, if filing)				wing postpetition chapter f the following date:
	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW Y	ORK		MM / DD / YYYY	_
	e number				
	nown)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people a ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes, Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expense:	s for Separate Househo	old of De	btor 2:	
2.	Do you have dependents?	5.0. Copa. 2.0			
-	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state the			1 10 10 10 10	□ No
	dependents names.	Son		11	■ Yes
		C		4.4	□ No
		Son		14	✓ Yes
		Son		21	■ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Est	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a supplicable date.				
the	lude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I:</i> ficial Form 106I.)	if you know Your Income		Your exp	penses
,01	noiai i oini 100i.j		901		
4.	The rental or home ownership expenses for your residence, payments and any rent for the ground or lot.	Include first mortgage	4,5	\$	2,746.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c	\$	0.00
	4d. Homeowner's association or condominium dues		4d		0.00
5.	Additional mortgage payments for your residence, such as he	ome equity loans	5.	\$	0.00

Debtor 1 Sonia Rosales	Case number (if known)	
5. Utilities:		
6а. Electricity, heat, natural gas	6a. \$ 430.0	n
6b. Water, sewer, garbage collection	6b. \$ 41.00	
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 282.0	_
6d Other. Specify: Cable	202.0	
Food and housekeeping supplies	100.0	
Childcare and children's education costs	1,000.0	
Clothing, laundry, and dry cleaning	210.00	
	9. \$ 250.00	
Personal care products and services	10. \$ 200.00	
Medical and dental expenses	11. \$ 100.00)
Transportation. Include gas, maintenance, bus or train fare.	12. \$ 500.00	1
Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and boo		
	10010	
Charitable contributions and religious donations	14. \$ 0.00)
. Insurance.	20	
Do not include insurance deducted from your pay or included in lines 4 of 15a. Life insurance	4.5	
	15a. \$ 0.00	
15b. Health insurance	15b. \$ 0.00	
15c. Vehicle insurance	15c. \$ 421.0 0)
15d. Other insurance. Specify:	15d. \$ 0.0 0)
Taxes. Do not include taxes deducted from your pay or included in lines	or 20,	_
Specify:	16. \$ 0.0 0	
Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$ 0.0 0	,
17b. Car payments for Vehicle 2	17b. \$ 0.0 0	,
17c. Other. Specify: Husband's car payment	17c. \$ 563.00	
17d. Other. Specify:	17d. \$ 0.00	A 100
Your payments of alimony, maintenance, and support that you did it	ot report as	-
deducted from your pay on line 5, Schedule I, Your Income (Official	Form 106I). 18. \$ 0.00	į.
Other payments you make to support others who do not live with you	u. \$ 100.00	
Specify: Care for Father in El Salvador	19,	
Other real property expenses not included in lines 4 or 5 of this form	or on Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$ 0.00	į.
20b. Real estate taxes	20b. \$ 0.0 0	
20c. Property, homeowner's, or renter's insurance	20c. \$ 0.0 0	-
20d, Maintenance, repair, and upkeep expenses	0.00	
20e. Homeowner's association or condominium dues	0.00	
	0.00	
	21. +\$ 100.00	
Son's college (monthly tuition installments, books)	+\$ 430.00	į
Son's swimming lessons	+\$ 166.00	
Calculate your monthly expenses		ï
22a. Add lines 4 through 21.	\$ 7.847.00	
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official F		
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ 7,847.00	
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a: \$ 7 .327.3 6	
23b. Copy your monthly expenses from line 22c above.	.,-=::-	
25b. Copy your monthly expenses non-fine 22c above.	23b\$ 7,847.00	
23c. Subtract your monthly expenses from your monthly income:		
The result is your monthly net income.	23c. \$ -519.64	. 11
The result is your monthly net income.	200.04	
Do you expect an increase or decrease in your expenses within the For example, do you expect to finish paying for your car loan within the year or do y modification to the terms of your mortgage?	ear after you file this form? u expect your mortgage payment to increase or decrease because	of a
■ No.		
☐ Yes, Explain here: *IRS housing standard from Mean		

Fill in this infor	rmation to identify your	case:	111111	g (-2/1 , 1 8/4 7)	4419
Debtor 1	Sonia Rosales				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the	EASTERN DISTRICT OF	NEW YORK		
Case number (if known)					Check if this is an amended filing
Official For	m 106Dec				
Declara	tion About a	n Individual	Debtor's So	chedules	12/15
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an attorn	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Peti Declaration, and Signa	tion Preparer's Notice, ture (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sumn	nary and schedules file	ed with this declaration and	
x don	ia Rosellas		X		
Sonia	Rosales are of Debtor 1		Signature of	Debtor 2	
Date	October 9, 2018		Date		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Fill in this	information to identify you	r case:		174576	4419
Debtor 1	Sonia Rosales				
D 11 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
Case num	ber			_	Check if this is an amended filing
Staten Be as cominformatio	nent of Financial plete and accurate as poss n. If more space is needed, known). Answer every que	ible. If two married people a attach a separate sheet to	are filing together, both are	equally responsible for su	4/10 oplying correct ur name and case
Part 1:	Give Details About Your Ma	arital Status and Where You	ı Lived Before		
1. What	is your current marital statu	us?			
_	Married Not married				
2. Durin	g the last 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. List all of the places you	lived in the last 3 years. Do no	ot include where you live now		
Debt	or 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. Within states and	n the last 8 years, did you en territories include Arizona, Ca	ver live with a spouse or leg difornia, Idaho, Louisiana, Ne	gal equivalent in a commun vada, New Mexico, Puerto Ri	ity property state or territor co, Texas, Washington and \	y? (Community property Nisconsin.)
	No Yes. Make sure you fill out <i>Sci</i>	hedule H: Your Codebtors (Ol	fficial Form 106H).		
Part 2	Explain the Sources of You	ır Income			
Fill in	ou have any income from er the total amount of income yo are filing a joint case and you	u received from all jobs and a	all businesses, including part-	time activities.	ndar years?
	No				
III \	es. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	uary 1 of current year until ou filed for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$2,975.00	☐ Wages, commissions, bonuses, tips	
		Operating a business		Operating a business	

Official Form 107

Debtor 1 Sonia Rosales			nia Rosale	es	Case number (if known)				
					Debtor 1		Debtor 2		
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			dar year: December (31, 2017)	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, com bonuses, tips	missions,	
					☐ Operating a business		☐ Operating a	business	
			dar year bef December 3		■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, com bonuses, tips	missions,	
					☐ Operating a business		☐ Operating a	business	
		each s	•	ne gross inco	se and you have income that		•		
					Debtord		Debtor 2		
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of Inc Describe below		Gross income (before deductions and exclusions)
			1 of currer	nt year until	Rental Income	\$10,000.00			
P	art 3:				Made Before You Filed for				
6.	Are □	eithei No.	Neither De	btor 1 nor D	's debts primarily consume Debtor 2 has primarily cons personal, family, or househo	<mark>umer debts.</mark> Consumer debt	's are defined in 11	U.S.C. § 10	01(8) as "incurred by an
			During the	90 days befo	ore you filed for bankruptcy, d	id you pay any creditor a tota	al of \$6,425* or mo	re?	
			□ No.	Go to line 7	'				
			Yes	paid that cr not include	each creditor to whom you pa editor. Do not include payme payments to an attorney for t t on 4/01/19 and every 3 year	nts for domestic support obliq this bankruptcy case.	gations, such as ch	nild support	and alimony. Also, do
			Subject	o adjustmen	t on 4/01/19 and every 3 year	is after that for cases filed on	of after the date of	i aujustinen	IL.
		Yes.			or both have primarily conso ore you filed for bankruptcy, d		al of \$600 or more?	1	
			■ No.	Go to line 7	· .				
			□ Yes	include pay	each creditor to whom you pa rments for domestic support o this bankruptcy case				
	Cr	editor'	s Name and	l Address	Dates of payme	ent Total amount	Amount you still owe	Was this	payment for

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Deb	tor 1	Sonia Rosales		Cas	e number (if known)		
	<i>Inside</i> of wh	n 1 year before you filed for bankruers include your relatives; any general ich you are an officer, director, person iness you operate as a sole proprietor ny.	partners; relatives of any gen in control, or owner of 20% o	eral partners; partne r more of their voting	rships of which you securities; and a	ou are a general pa ny managing ager	artner; corporations at, including one fo
		No					
		Yes. List all payments to an insider					
	Insid	der's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for this	s payment
	insid	n 1 year before you filed for bankru er? de payments on debts guaranteed or c		ments or transfer a	ny property on a	ccount of a debt	that benefited an
		No					
		Yes. List all payments to an insider					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this Include creditor	
-	V PI	Library Control I A 4	: -				
Pan	(4)	Identify Legal Actions, Repossess	ions, and Foreciosures				
	List al	n 1 year before you filed for bankru Il such matters, including personal inju ications, and contract disputes.					
		No					
	≡ '	Yes. Fill in the details.					
	Case	e title	Nature of the case	Court or agency		Status of the ca	ase
	US I	Bank vs. Rosales	Foreclosure	Supreme Court	of the State	☐ Pending	
	15-6	06559	Proceeding	of NY;Suffolk		☐ On appeal	
						Concluded	
						Judgment en	tered
							=====
		n 1 year before you filed for bankru k all that apply and fill in the details be		rty repossessed, fo	oreclosed, garnis	hed, attached, se	eized, or levied?
		No. Go to line 11.					
	_	Yes. Fill in the information below.					
	Cred	litor Name and Address	Describe the Property		Date		Value of the
			Explain what happened				property
1.1	18/:4h:	= 00 days before you filed for books			anaial inatitutia-		to from your
11.	accou	n 90 days before you filed for bankr unts or refuse to make a payment b No	ecause you owed a debt?	uding a bank of ini	anciai institution	, set on any amo	unts from your
		Yes. Fill in the details.					
	Cred	litor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
		n 1 year before you filed for bankru -appointed receiver, a custodian, or		rty in the possession	on of an assigne	e for the benefit (of creditors, a
	-		and the contract				
	_	No You					
	ш,	Yes					

Dei	Sonia Rosales	Case number	(if known)	
Pai	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrup	tcy, did you give any gifts with a total value of more t	han \$600 per person	?
	No			
	Yes. Fill in the details for each gift.	Describe the gifts	Dates you gave	Value
	Gifts with a total value of more than \$600 per person	Describe the glits	Dates you gave the gifts	value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	tcy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or con			
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptor gambling? No Yes. Fill in the details.	cy or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
		escribe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.	loss	lost
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or pre	cy, did you or anyone else acting on your behalf pay of paring a bankruptcy petition? parers, or credit counseling agencies for services require		rty to anyone you
	□ No			
	Yes, Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You	transferred	or transfer was made	payment
	Ronald D. Weiss P.C.	Includes \$1,500 legal fee, \$335 Court	Paid \$1,500	\$1,895.00
	734 Walt Whitman Road	filing fee, \$35 credit counseling fee, \$25	on 10/8/18	,
	Suite 203 Melville, NY 11747	credit report fee	and \$395 on 10/9/18	
17.		cy, did you or anyone else acting on your behalf pay or ors or to make payments to your creditors? ou listed on line 16.	or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
			maue	

Deb	otor 1 Sonia Rosales				Case num	Der (it known)	
	Within 2 years before you file transferred in the ordinary co Include both outright transfers a	urse of your bu	siness or financial affai	rs?			
	include gifts and transfers that y			gg		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7/
	■ No)
	Yes. Fill in the details.						
	Person Who Received Trans Address	fer	Description and va property transferre		payme	ibe any property or ents received or debts n exchange	Date transfer was made
	Person's relationship to you						
	Within 10 years before you fil beneficiary? (These are often			property to a	a self-settle	d trust or similar device	of which you are a
	No Silli II I I I I						
	Yes. Fill in the details.						Data Tarantana
	Name of trust		Description and va	alue of the pro	perty trans	sterred	Date Transfer was made
Par	t 8: List of Certain Financia	l Accounts, Inst	truments, Safe Deposit	Boxes, and S	torage Unit	s	
			· · · · · · · · · · · · · · · · · · ·				64
	Within 1 year before you filed sold, moved, or transferred? Include checking, savings, m houses, pension funds, coop	oney market, or	other financial accoun	ts; certificate:	s of deposi		
	■ No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, Stat Code)		Last 4 digits of account number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Do you now have, or did you cash, or other valuables?	have within 1 ye	ear before you filed for	bankruptcy, a	ny safe dep	oosit box or other depos	sitory for securities,
	■ No						
	☐ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State		Who else had acce Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a	a storage unit or	r place other than your	home within 1	l year befor	e you filed for bankrupt	cy?
	_						
	No Sill the date its						
	Yes. Fill in the details.		100		D	41	Da *******************************
	Name of Storage Facility Address (Number, Street, City, State	te and ZIP Code)	Who else has or hoto it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Da	40. Ide-tif. Droporty Voy U	lald ar Cantral f	or Somoono Elso				
Par	t 9: Identify Property You H	iola or Control I	or someone Else				
23	Do you hold or control any profor someone.	roperty that son	neone else owns? Inclu	de any prope	rty you bor	rowed from, are storing	for, or hold in trust
	No☐ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, Sta	te and ZIP Code)	Where is the prope (Number, Street, City, St Code)		Describe	the property	Value
Par	t 10: Give Details About Env	rironmental Info	rmation				
Eo-	the purpose of Part 10, the fol	lowing definitio	ns annly:				
. 01	the purpose of Fait 10, the lot		appij.				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Deb	otor 1	Sonia Rosales		Case number (if known)	
		substances, wastes, or material into thations controlling the cleanup of these	e air, land, soil, surface water, ground substances, wastes, or material.	water, or other medium, including sta	atutes or
		neans any location, facility, or property n, operate, or utilize it, including dispo	as defined under any environmental la sal sites.	aw, whether you now own, operate, o	r utilize it or used
		<i>rdous material</i> means anything an envi dous material, pollutant, contaminant,	ronmental law defines as a hazardous or similar term.	waste, hazardous substance, toxic s	ubstance,
Rep	ort all	notices, releases, and proceedings tha	t you know about, regardless of when	they occurred.	
24.	Has a	ny governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environme	ntal law?
		No /es. Fill in the details.			
		e of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have	you notified any governmental unit of	any release of hazardous material?		
	_ `	No ⁄es. Fill in the details.			
		e of site 'ess (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or adm	inistrative proceeding under any envir	onmental law? Include settlements a	nd orders.
	III N	No			
		res. Fill in the details.			
		e Title • Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	t 11:	Give Details About Your Business or 0	Connections to Any Business		
27.	Withi	n 4 vears before you filed for bankrupt	cy, did you own a business or have any	of the following connections to any	business?
			a trade, profession, or other activity,		
	[☐ A member of a limited liability comp	any (LLC) or limited liability partnershi	p (LLP)	
	[☐ A partner in a partnership			
	[☐ An officer, director, or managing ex	ecutive of a corporation		
	[☐ An owner of at least 5% of the voting	or equity securities of a corporation		
		No. None of the above applies. Go to P	art 12.		
			in the details below for each business.		
		ness Name	Describe the nature of the business	Employer Identification number	
	Addr		Name of accountant or bookkeeper	Do not include Social Security r	
	1	,	Name of accountant or bookkeeper	Dates business existed	
		Employed - Cleaning	Cleaning	EIN:	
		yden St tington Station, NY 11746		From-To	

Debi	tor 1	Sonia Rosales		Case number (if known)
		n 2 years before you filed for bankrupt utions, creditors, or other parties.	cy, did you give a financial statement t	o anyone about your business? Include all financial
	_	No Yes. Fill in the details below.		
	Name Addr (Numb	~	Date Issued	

Debtor	1 Sonia Rosales	Case number (if known)
Part 12	Sign Below	
are true with a b		ffairs and any attachments, and I declare under penalty of perjury that the answers tement, concealing property, or obtaining money or property by fraud in connection b, or imprisonment for up to 20 years, or both.
	Rosales ure of Debtor 1	Signature of Debtor 2
Date	October 9, 2018	Date
Did you ■ No □ Yes	attach additional pages to Your Statement of Fin	ancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you	pay or agree to pay someone who is not an attor	ney to help you fill out bankruptcy forms?
☐ Yes.	Name of Person Attach the Bankruptcy Petit	ion Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your	case:		4419
Debtor 1	Sonia Rosales			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTR	RICT OF NEW YORK	
Case number (if known)				☐ Check if this is an amended filing
Official Fo		n for Indiv	riduals Filing Under Chapt	er 7 12/15
creditors have least You must file th	ever is earlier, unless th	ur property, or and the lease has n vithin 30 days after		
	eople are filing togethe	r in a joint case, bo	th are equally responsible for supplying correct i	nformation. Both debtors must
	and accurate as possib our name and case nur		s needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Y	our Creditors Who Have	e Secured Claims		
1. For any credit	tors that you listed in Pa	art 1 of Schedule D	: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
information b			What do you intend to do with the property tha secures a debt?	
			Secures a debt?	as exempt on Schedule Or
Creditor's N	Лг. Cooper fka Natior	ıstar	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
	5 Leyden St Huntir NY 11746 Suffolk		☐ Retain the property and enter into a Reaffirmation Agreement.	Yes
property securing debt		County	Retain the property and [explain]: Retain	
For any unexpire in the information	on below. Do not list rea	ase that you listed Il estate leases. Un	in Schedule G: Executory Contracts and Unexpir expired leases are leases that are still in effect; the the trustee does not assume it. 11 U.S.C. § 365(p)	ne lease period has not yet ended.
Describe your u	unexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name: Description of le	ased			□ No
Property:				☐ Yes
Lessor's name: Description of le	ased			□ No
Property:				☐ Yes
Lessor's name:				□ No
Official Form 108		Statement of In	tention for Individuals Filing Under Chapter 7	page 1

Debtor 1	Sonia Rosales	Case number (if known)
Descripti Property	on of leased :	☐ Yes
Lessor's Descripti Property	on of leased	□ No
Lessor's Descripti Property	on of leased	□ No
Lessor's Descripti Property	on of leased	□ No
Lessor's Descripti Property	on of leased	□ No
Part 3:	Sign Below	
X Soi	nalty of perjury, I declare that I have indicated my that is subject to an unexpired lease. Lower Royales nature of Debtor 1	intention about any property of my estate that secures a debt and any personal X Signature of Debtor 2
Dat	October 9, 2018	Date

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL **BANKRUPTCY RULE 1073-2(b)**

CASE NO.:.

DEBTOR(S):	Sonia Rosales	CASE NO.:
Pursuant to concerning Related	Local Bankruptcy Rule 1073-2 Cases, to the petitioner's best kn	(b), the debtor (or any other petitioner) hereby makes the following disclosure nowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before thes; (iii) are affiliates, as defined or more of its general partners;	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case ne filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) ither of the Related Cases had, an interest in property that was or is included in the .]
■ NO RELATED	CASE IS PENDING OR HAS E	BEEN PENDING AT ANY TIME.
☐ THE FOLLOW	ING RELATED CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:
CURRENT STAT	US OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (A	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PEN	DING (Y/N):	[If closed] Date of closing:
CURRENT STAT	US OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (A	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE OF RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PEN	DING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
(Discharge	ed/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE of	above);
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("RESCHEDULE "A" OF RELATED CASE:	EAL PROPERTY") WHICH WAS ALSO LISTED IN
NOTE: Pursuant to 11 U.S.C. § 109(g), certain individuals who have be eligible to be debtors. Such an individual will be required to file	
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY	Y, AS APPLICABLE:
I am admitted to practice in the Eastern District of New York (Y/N)): <u> </u>
CERTIFICATION (to be signed by pro se debtor/petitioner or debtor	or/petitioner's attorney, as applicable):
I certify under penalty of perjury that the within bankruptcy case is as indicated elsewhere on this form.	not related to any case now pending or pending at any time, except
Ronald D. Weiss 4419 Signature of Debtor's Attorney Ronald D. Weiss, P.C. 734 Walt Whitman Road	Signature of Pro Se Debtor/Petitioner
Suite 203 Melville, NY 11747 (631) 271-3737 Fax:(631) 271-3784	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
Failure to fully and truthfully provide all information required by the	Area Code and Telephone Number e E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

United States Bankruptcy Court

4419

Eastern District of New York

In re	Sonia Rosales			Case No.	
		Debtor(s)	Chapter	7	

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: October 9, 2018

Date: October 9, 2018

Sonia Rosales

Signature of Debtor

Signature of Attorney Ronald D. Weiss 4419 Ronald D. Weiss, P.C. 734 Walt Whitman Road

Suite 203 Melville, NY 11747

(631) 271-3737 Fax: (631) 271-3784

USBC-44

UNITED	STATES BANKRUPTCY COURT	4419
EASTE	RN DISTRICT OF NEW YORK	
	X	Chapter 7
IN RE:	Sonia Rosales	
		Case No.:
	Debtor(s)	STATEMENT PURSUANT TO LOCAL RULE 2017
	Y	OTT TEMENT TO COOKE NOCE 2017

- I, Ronald D. Weiss 4419, an attorney admitted to practice in this Court, state:
- 1. That I am the attorney for the above-named debtor(s) and am fully familiar with the facts herein.
- 2. That prior to the filing of the petition herein, my firm rendered the following services to the above-named debtor(s):

Date\Time	Services
10/8/18	Initial interview, analysis of financial condition, etc.
10/9/18	Preparation and review of Bankruptcy petition

- 3. That my firm will also represent the debtor(s) at the first meeting of creditors.
- 4. That all services rendered prior to the filing of the petition herein were rendered by my firm.
- 5. That my usual rate of compensation of bankruptcy matters of this type is \$ __1,500.00 _.

Dated: October 9, 2018

Ronald D. Weiss 4419
Attorney for debtor(s)
Ronald D. Weiss, P.C.
734 Walt Whitman Road
Suite 203
Melville, NY 11747
(631) 271-3737 Fax:(631) 271-3784
weiss@ny-bankruptcy.com